

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HL		10-10-01
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	CC	50114	10-11-01

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral) Canceled	A	Appeal
:	Restricted	O	Objected

Claim	Date	Claim	Date	Claim	Date
Final Original 1-2/11/03		Final Original 1-2/11/03		Final Original	
51		51		101	
52		52		102	
53		53		103	
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93		93		143	
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97		97		147	
98		98		148	

Attach additional sheets here

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